Clarendon County

Type: D	ay Care	Facility	for	Adults
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Name of Facility Location Street Location City, State Administrator	License or Permit #/Expiration Date County / Ownership Type Mailing Address Licensee	Total Number of Licensed Units: Beds, OR's, Counties, etc.
Branco Adult DayCare Center, LLC 9 South Church Street Manning, SC 29102 Ms. Angela Witherspoon PH #: 803-435-9780	ADC-241 / Expires: 8/31/2004 Clarendon / Ltd. Liability 9 South Church Street Manning, SC 29102 BranCo Adult DayCare Center, LLC	30
Licensed Units	Certified For:	
# Units Type of Units 30 Participants Total Licensed Units		
Macedonia Adult Day Care 14362 Raccoon Road Manning, SC 29102 Mr. Eddie Lesaine PH #: 803-473-7692	ADC-229 / Expires: 8/31/2004 Clarendon / Sole Proprietor 14362 Raccoon Road Manning, SC 29102 Macedonia Adult Day Care	18
Licensed Units	Certified For:	
# Units Type of Units 18 Participants Total Licensed Units		
Rock Hill Missionary Adult Day Care Rt. 1, Box 916 Manning, SC 29102 Rev. Leon Winn PH #: 803-473-4315	ADC-218 / Expires: 3/31/2004 Clarendon / Non-Profit 6569 Old GeorgetownRoad Manning, SC 29102 Rock Hill Missionary Baptist Church	20
Licensed Units	Certified For:	
# Units Type of Units 20 Participants Total Licensed Units		

Total Number of Activities/Facilities Licensed as a Day Care Facility for Adults: ${\bf 3}$

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Type: Intermediate Care Facility for the Mentally Retarded (15 beds or Less)

Name of Facility Location Street Location City, State Administrator	License or Permit #/Expiration Date County / Ownership Type Mailing Address Licensee	Total Number of Licensed Units: Beds, OR's, Counties, etc.
Vanguard Residential Services, Inc., I 200 East Hospital Street Manning, SC 29102 Mr. David Baker PH #: 803-435-2330	MR15-048 / Expires: 9/30/2004 Clarendon / Non-Profit P.O. Drawer 40 Manning, SC 29102 Vanguard Residential Services, Inc.	8
	Certified For:	
Vanguard Residential Services, Inc., II 512 South Church Street Manning, SC 29102 Mr. David Baker PH #: 803-435-2330	MR15-049 / Expires: 9/30/2004 Clarendon / Non-Profit P.O. Drawer 40 Manning, SC 29102 Vanguard Residential Services, Inc.	8
	Certified For:	

Total Number of Activities/Facilities Licensed as a Intermediate Care Facility for the Mentally Retarded (15 beds or Less): 2

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

March 02, 2004

South Carolina Department of Health & Environmental Control Division of Health Licensing

Clarendon County

Type: Home Health Agency

Name of FacilityLicense or Permit #/Expiration DateTotal Number ofLocation StreetCounty / Ownership TypeLicensed Units:Location City, StateMailing AddressBeds, OR's,AdministratorLicenseeCounties, etc.

Clarendon Memorial Home Health HHA-141 / Expires: 1/31/2005

409 South Mill Street

Manning, SC 29102

Ms. Rebecca Cartwright

PH #: 803-435-4494

Clarendon / Non-Profit

409 South Mill Street

Manning, SC 29102

Clarendon Hospital District

Counties Served: Certified For:

Clarendon

Total Number of Activities/Facilities Licensed as a Home Health Agency: 1

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Type: **Hospital or Institutional General Infirmary**

Name of Facility	License or Permit #/Expiration Date	Total Number of
Location Street	County / Ownership Type	Licensed Units:
Location City, State	Mailing Address	Beds, OR's,
Administrator	Licensee	Counties, etc.
	HEL 010 / E	56

Clarendon Memorial Hospital HTL-012 / Expires: 7/31/2004

10 Hospital Street Clarendon / Non-Profit

Manning, SC 29102 P. O. Box 550

Mr. Edward Frye Manning, SC 29102-0550 PH #: 803-435-8463 Clarendon Hospital District

Licensed Units Certified For: Perinatal Level I

Type of Units # Units General Beds 56

General Infirmary: 1

56 **Total Licensed Units**

Total Number of Activities/Facilities Licensed as a Hospital or Institutional Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Type: Nursing Home

64

64

Name of Facility Location Street Location City, State Administrator	License or Permit #/Expiration Date County / Ownership Type Mailing Address Licensee	Total Number of Licensed Units: Beds, OR's, Counties, etc.
Lake Marion Nursing Facility Gibson Road Summerton, SC 29148 Ms. Mary McLeod PH #: 803-485-2317	NCF-736 / Expires: 1/31/2005 Clarendon / Corporation P.O. Box 1159 Summerton, SC 29148 Clarendon Memorial Hospital	88
Licensed Units # Units Type of Units 88 Nursing Home Beds Total Licensed Units	Certified For:	
Windsor Manor 5583 Summerton Highway Manning, SC 29102 Ms Karen Way PH #: 803-478-2323	NCF-737 / Expires: 1/31/2004 Clarendon / Corporation P. O. Box 1230 Summerton, SC 29148 Clarendon Memorial Hospital	64
Licensed Units # Units Type of Units	Certified For:	

Total Number of Activities/Facilities Licensed as a Nursing Home: 2

Nursing Home Beds

Total Licensed Units

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Type: Outpatient Facility That Treats Individuals for Psychoactive Substance Abuse or Dependence

Name of Facility Location Street Location City, State Administrator		License or Permit #/Expiration Date County / Ownership Type Mailing Address Licensee	Licensed Units: Beds, OR's, Counties, etc.
Clarendon Behavioral I	Health Services	OTP-048 / Expires: 2/28/2005	1
14 North Church Street	i e	Clarendon / County	
Manning, SC 29102		P.O. Box 430	
Ms. Arvilla Kirven	PH #: 803-435-4044	Manning, SC 29102	

Certified For:

Clarendon County Commission on ADA

Total Number of Activities/Facilities Licensed as a Outpatient Facility That Treats Individuals for Psychoactive Substance Abuse or Dependence: 1

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Type: End Stage Renal Dialysis Facility

Name of Facility		License or Permit #/Expiration Date	Total Number of
Location Street		County / Ownership Type	Licensed Units:
Location City, State		Mailing Address	Beds, OR's,
Administrator		Licensee	Counties, etc.
FMC - Lake Marion 432 Buff Boulevard Summerton, SC 29148 Ms.Mr Tester Lewis	PH #: 803-485-2341	ERD-99 / Expires: 2/28/2005 Clarendon / Corporation 432 Buff Boulevard Summerton, SC 29148 Bio-Medical Applications of South Carolina, Inc.	13

Licensed Units Certified For:

Units Type of Units
13 Stations

13 Total Licensed Units

Manning Dialysis CenterERD-056 / Expires: 3/31/2004122 North Brooks StreetClarendon / CorporationManning, SC 29102122 North Brooks StreetMr. Tester LewisPH #: 803-435-4428Manning, SC 29102

Bio-Medical Applications of South Carolina, Inc.

Licensed Units Certified For:

Units Type of Units Stations

20 Total Licensed Units

Total Number of Activities/Facilities Licensed as a End Stage Renal Dialysis Facility: 2

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served:

Clarendon County

Care Facility: 5

Type:	Community	Residential	Care	Facility

Name of Facility Location Street Location City, State Administrator	License or Permit #/Expiration Date County / Ownership Type Mailing Address Licensee	Total Number of Licensed Units: Beds, OR's, Counties, etc.
Clarendon Community Residential Care Center, Inc. Highway 30l, South Manning, SC 29102	CRC-805 / Expires: 2/29/2004 Clarendon / Corporation PO Box 640	90
Mr. Curtis Fennell PH #: 803-473-3504	Manning, SC 29102 Clarendon Community Residential Care Center, Inc.	
	Certified For:	
Dorch Community Residential Care	CRC-1078 / Expires: 4/30/2004	13
Highway 521 East	Clarendon / Sole Proprietor	
Manning, SC 29102	P. O. Box 122	
Ms. Willa Mae Scott PH #: 803-473-4681	Manning, SC 29102 Evelyn Dorch Lewis and Andrew Dorch	
	Certified For:	
Harvin Haven I	CRC-1202 / Expires: 4/30/2004	5
1024 Herriot Street	Clarendon / Sole Proprietor	
Manning, SC 29102	1024 Herriot Street	
Mr. Johnny Wilson PH #: 803-435-9928	Manning, SC 29102 Santee-Wateree Community Mental Health Center	
	Certified For:	
Harvin Haven II	CRC-1203 / Expires: 4/30/2004	5
1144 Bloomville Road	Clarendon / Sole Proprietor	
Manning, SC 29102	1144 Bloomville Road	
Mr. Johnny Wilson PH #: 803-435-9737	Manning, SC 29102	
	Santee-Wateree Community Mental Health Center	
	Certified For:	
Ram Bay Residential Care Facility	CRC-1284 / Expires: 7/31/2004	5
1380 Williams Acres Lane	Clarendon / Sole Proprietor	
Manning, SC 29102 Mrs. Eartha Williams PH #: 803-473-2349	Post Office Box 383 Manning, SC 29102 Eartha Y. Williams	
	Certified For:	
	Certified For:	

Locations, Participants or Counties Served:

Total Number of Activities/Facilities in Clarendon County: 17

Total Number of Beds, Operating Rooms, Stations, Locations, Participants or Counties Served: